Building Capacity through Program Evaluation

DMH Housing Institute 2014





Panelists

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Affordable Living for the Aging

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Affordable Living for the Aging

Overview

- I. Background on ALA and Bonnie Brae Village
- **II.** Why Does Program Evaluation Matter?
- III. How to Get Started
- IV. Evaluation Plan
- V. Funding
- VI. Evaluation Process
- VII. What to Do with the Results

Vital Research

Vital Research **empowers** clients utilizing our expertise in:

Research design
Survey development
Data collection
Statistical analysis



Affordable Living for the Aging

ALA provides affordable

permanent supportive housing,

shared living residences and
home-sharing for seniors.



Bonnie Brae Village Community



46 units
Homeless with
mental illness

45 units

Low-income



Mixed Population of Seniors 62+

Video from BBV Grand Opening

Integrated Service Model

- Voluntary
- Proactive
- Self-directed
- Flexible



Social Service Program Goals







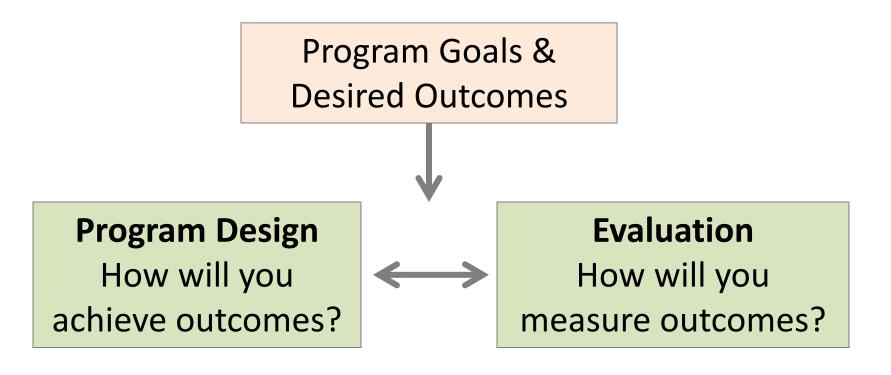
Why Does Evaluation Matter?

Extraordinary claims require extraordinary evidence. -Carl Sagan

Evaluate what you want — because what gets measured, gets produced.

-James Belasco

What Gets Measured Gets Produced





ALA Conducted the Evaluation To:

- Assess program effectiveness
- Gather information to inform improvements
- Build capacity for replication

Timing was right...



Evaluation Design

- 1. Measure progress
- 2. Accuracy and reliability
- 3. Identifies specific areas for improvement or modifications
- 4. Reveals intended and unintended outcomes
- 5. Provides structure



How to Get Started

- Articulate program goals
- Draft evaluation questions
- Consider available data sources
 - ✓ Does data match questions?
- Identify third party evaluators



Evaluation Questions

- What services does the Bonnie Brae Village Program provide to homeless seniors and are they satisfied with these services?
- How is the program being implemented?
- How effective is the program in assisting homeless seniors to maintain the highest level of independence and stability?

Work with a Program Evaluator

- Develop scope of work with the evaluator
- Facilitate staff participation
- Discuss feasibility based on data sources
- Request proposal from evaluator
- Review proposal: agree upon budget and timeline



Determine the Type of Evaluation

- ALA had data from at least two points of time for most of the tenant roster
- ALA selected a process and outcomes evaluation







Funding

Are any of you looking for funding now?

- 1. Prepare competitive proposal
- 2. Identify targets



Section 4 HUD Funding Foundations or institutions that care about:

- ✓ Resident Services
- ✓ Outcomes your evaluation proposes to analyze
- ✓ Population served by your program

You Have Funding – Now What?

- 1. Revisit plan
- 2. Finalize evaluation timeline
- 3. Discuss data sources
- 4. Organize data for evaluators



Discussion - Evaluation Experiences

What kind of information do you collect?

Who has completed an evaluation?

What are some of the lessons you learned?

Evaluation Process - Data Collection and Analysis

ALA's data sources:

- Annual Satisfaction Survey
- Bio-psychosocial Assessment
- Progress Notes
- Focus Groups
- Staff Interviews



Affordable Living for the Aging

BONNIE BRAE VILLAGE PROCESS AND OUTCOME EVALUATION



Prepared by Vital Research March 2014



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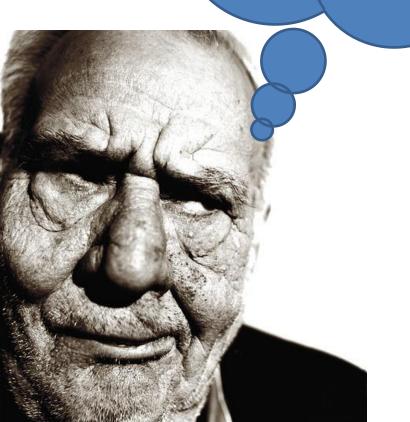
Key Findings

 Data Collection Procedures (Process part of evaluation)

- Quality of Life Outcomes
- Staff Tenant Relations

Challenges

There's another page to this assessment?





Key Findings

Data Collection

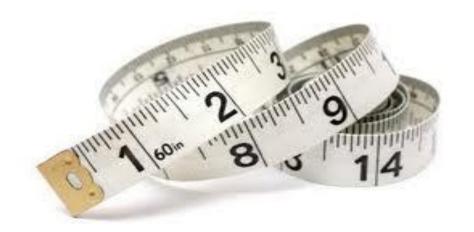
- 12-page assessment
- Multiple screening tools
- Lack of formalized tracking system
- Limited oversight & QA



Vital Research Recommendations

Data Collection

- Measurement
- Burden
- Tracking Systems and Procedures
- Incentives
- Value



Key Findings

Quality of Life – self report

27% Health had improved

43% Same health one year later

30% Health had declined



Key Findings - *Quality of Life*

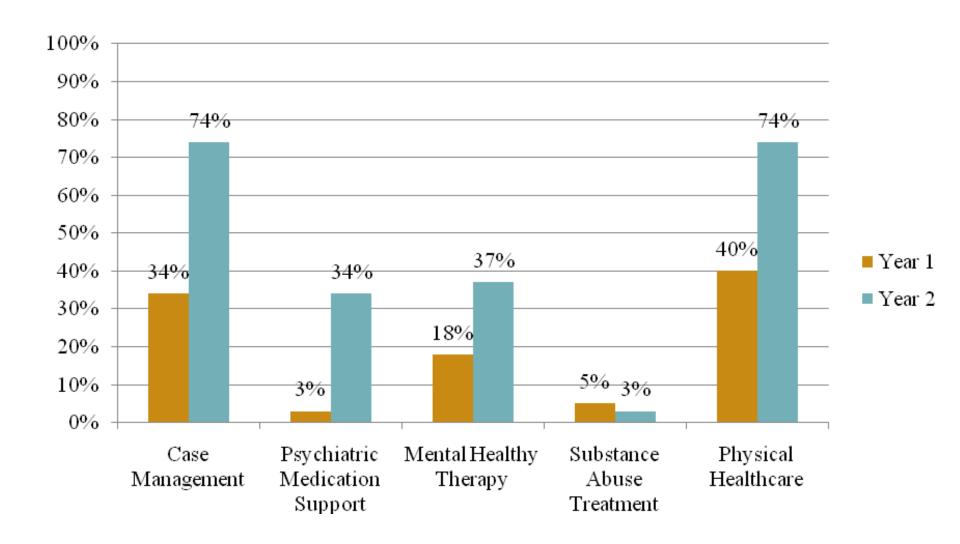
QOL ITEM	Intake (Average)	Year 1	
Number of days physical health was not good	16.1	13.6	
Number of days mental health was not good	12.0	8.8	
Number of days physical or mental health kept you from doing usual activities	23.0	7.8	
Visits to PCP	9.0	9.9	
Unscheduled ER trips in past 12 months	2.7	3.6	2:
Hospitalizations in past 12 months	1.6	2.3	

Key Findings

Services Delivered

SERVICES RECEIVED	Year 1	Year 2
Case Management	84%	94%
Psychiatric Medication Support	38%	54%
Mental Health Therapy	64%	64%
Substance Abuse Treatment	13%	14%
Physical Healthcare	87%	88%
Employment/Educational/ Volunteer Services	24%	29%
Life Skills Training	31%	29%
Self Help/Peer/Caregiver Support Groups	22%	26%
Recreational/Social Activities	87%	85%
Supportive Service Coordination/ Linkage	86%	87%

Key Findings *Services Delivered*



Key Findings

Staff - Tenant Relations

61% Contact with social worker 1x a month

27% More than 1x a month

12% No contact at all

Recommendation Categories

- I. Data Collection
- II. Staff & Tenant Relations
 - Transparency
 - Access
- III. Tenant Engagement
 - Orientation and personalization
- **IV.** Strategic Partners



Full Report Available:

http://www.alaseniorliving.org/publications



Publications

ALA Publications:

2014 Outcome Evaluation of Social Services at Bonnie Brae Village

2012 Shared Housing Strategic Guide

2011 Home Share Case Study





